

Original #4.

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Application)	ATTORNEY'S DOCKET NUMBER 2300-1481CIP
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09297648-031000

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Novel Human Genes and Gene Expression Products II

the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as United States application

Serial No. 09/297,648

on May 4, 1999

and was amended

on _____ (if applicable).

☒ was filed as PCT international application

Number PCT/US99/01619

on January 28, 1999

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:			
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
U.S.A.	60/072,910	January 28, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/075,954	February 24, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,114	March 31, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,515	April 3, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/105,234	October 21, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/105,877	October 27, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,666	April 3, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration for Patent Application and Power of Attorney (Continued)
(includes Reference to PCT International Application)

ATTORNEY'S DOCKET NUMBER
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PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT/US99/01619	January 28, 1999		XX	

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Karl Bozicevic, Reg. No. 28,807
Bret E. Field, Reg. No. 37,620
Diana L. DeVore, Reg. No. 22,484
Carol L. Francis, Reg. No. 36,513
Pamela J. Sherwood, Reg. No. 26,627
Renee A. Fitts, Reg. No. 35,136
Paula A. Borden, Reg. No. 42,344

Robert P. Blackburn, Reg. No. 30,447
Joseph H. Guth, Reg. No. 31,261
Alisa A. Harbin, Reg. No. 33,895
Charlene A. Launer, Reg. No. 33,035
David P. Lentini, Reg. No. 33,944
Kimberlin L. Morley, Reg. No. 35,391

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(Name and telephone number)
Name:
Registration No.
Telephone: (650) 327-3400

202	FULL NAME OF INVENTOR 1 - 00	FAMILY NAME Williams	FIRST GIVEN NAME Lewis	SECOND GIVEN NAME L.
	RESIDENCE & CITIZENSHIP	CITY Tiburon CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 Mirotlores	CITY Tiburon	STATE & ZIP CODE/COUNTRY California 94920
202	FULL NAME OF INVENTOR 2 - 00	FAMILY NAME Escobedo	FIRST GIVEN NAME Jaime	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Alamo CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP CL
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1470 Lavorna Road	CITY Alamo	STATE & ZIP CODE/COUNTRY California 94507
203	FULL NAME OF INVENTOR 3 - 00	FAMILY NAME Innis	FIRST GIVEN NAME Michael	SECOND GIVEN NAME A.
	RESIDENCE & CITIZENSHIP	CITY Moraga CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 315 Constance Place	CITY Moraga	STATE & ZIP CODE/COUNTRY California 94556

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 *2-7 min* SIGNATURE OF INVENTOR 202 *Jaime Escobedo* SIGNATURE OF INVENTOR 203 *Michael A. Innis*
DATE Dec 16 '99 DATE 12/7/99 DATE 9-30-99

204	FULL NAME OF INVENTOR <u>A - co</u>	FAMILY NAME <u>Garcia</u>	FIRST GIVEN NAME <u>Pablo</u>	SECOND GIVEN NAME <u>Dominguez</u>
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco</u> CA	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>CL</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>882 Chenery Street</u>	CITY <u>San Francisco</u>	STATE & ZIP CODE/COUNTRY <u>California 94131</u>
205	FULL NAME OF INVENTOR <u>S - co</u>	FAMILY NAME <u>Sudduth-Klinger</u>	FIRST GIVEN NAME <u>Julie</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Kensington</u> CA	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>280 Lexington Road</u>	CITY <u>Kensington</u>	STATE & ZIP CODE/COUNTRY <u>California 94707</u>
206	FULL NAME OF INVENTOR <u>S - co</u>	FAMILY NAME <u>Reinhard</u>	FIRST GIVEN NAME <u>Christoph</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Alameda</u> CA	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>DE</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1633 Clinton Avenue</u>	CITY <u>Alameda</u>	STATE & ZIP CODE/COUNTRY <u>California 94501</u>
207	FULL NAME OF INVENTOR	FAMILY NAME <u>Giese</u>	FIRST GIVEN NAME <u>Klaus</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Berlin</u>	STATE OR FOREIGN COUNTRY <u>Germany</u>	COUNTRY OF CITIZENSHIP <u>DE</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>Chausseetraub 92</u>	CITY <u>Berlin</u>	STATE & ZIP CODE/COUNTRY <u>Germany 10115</u>
208	FULL NAME OF INVENTOR <u>S - co</u>	FAMILY NAME <u>Randazzo</u>	FIRST GIVEN NAME <u>Filippo</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco</u> CA	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>690 Chestnut Street, #403</u>	CITY <u>San Francisco</u>	STATE & ZIP CODE/COUNTRY <u>California 94433</u>
209	FULL NAME OF INVENTOR <u>S - co</u>	FAMILY NAME <u>Kennedy</u>	FIRST GIVEN NAME <u>Giulia</u>	SECOND GIVEN NAME <u>C.</u>
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco</u> CA	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>360 Castaneda Avenue</u>	CITY <u>San Francisco</u>	STATE & ZIP CODE/COUNTRY <u>California 94116</u>
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 204 <u>Pablo Dominguez</u>		SIGNATURE OF INVENTOR 205 <u>Julie Sudduth-Klinger</u>		SIGNATURE OF INVENTOR 206 <u>Christoph Reinhard</u>
DATE <u>10/6/99</u>		DATE <u>12/7/99</u>		DATE <u>09/30/1999</u>
SIGNATURE OF INVENTOR 207 <u>J2</u>		SIGNATURE OF INVENTOR 208 <u>J2</u>		SIGNATURE OF INVENTOR 209 <u>Giulia C Kennedy</u>
DATE <u>10/6/99</u>		DATE <u>10/25/99</u>		DATE <u>12/7/99</u>

210	FULL NAME OF INVENTOR <u>10-00</u>	FAMILY NAME <u>Pot</u>	FIRST GIVEN NAME <u>David</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco</u> <u>CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>CA</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1565 5th Avenue, #102</u>	CITY <u>San Francisco</u>	STATE & ZIP CODE/COUNTRY <u>California 94112</u>
211	FULL NAME OF INVENTOR <u>11-00</u>	FAMILY NAME <u>Kassam</u>	FIRST GIVEN NAME <u>Altai</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Oakland</u> <u>CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>2650 Harold Street</u> <u>3310 MIDVALE AVE.</u> <u>AK 10/4/99</u>	CITY <u>Oakland</u>	STATE & ZIP CODE/COUNTRY <u>California 94602</u>
212	FULL NAME OF INVENTOR <u>12-00</u>	FAMILY NAME <u>Lamson</u>	FIRST GIVEN NAME <u>George</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Moraga</u> <u>CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>232 Sandringham Drive</u>	CITY <u>Moraga</u>	STATE & ZIP CODE/COUNTRY <u>California 94556</u>
213	FULL NAME OF INVENTOR	FAMILY NAME <u>Drmanac</u>	FIRST GIVEN NAME <u>Radoje</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Palo Alto</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>YU</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>850 East Greenwich Place</u>	CITY <u>Palo Alto</u>	STATE & ZIP CODE/COUNTRY <u>California 94303</u>
214	FULL NAME OF INVENTOR	FAMILY NAME <u>Crkvenjakov</u>	FIRST GIVEN NAME <u>Radomir</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Sunnyvale</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>YU</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>762 Haverhill Drive</u>	CITY <u>Sunnyvale</u>	STATE & ZIP CODE/COUNTRY <u>California 94086</u>
215	FULL NAME OF INVENTOR	FAMILY NAME <u>Dickson</u>	FIRST GIVEN NAME <u>Mark</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Hollister</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1411 Gabilan Drive, #B</u>	CITY <u>Hollister</u>	STATE & ZIP CODE/COUNTRY <u>California 95025</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 210 <i>David A. Pot</i>	SIGNATURE OF INVENTOR 211 <i>[Signature]</i>	SIGNATURE OF INVENTOR 212 <i>George Lamson</i>
DATE <u>9/24/99</u>	DATE <u>10/4/99</u>	DATE <u>12/7/99</u>
SIGNATURE OF INVENTOR 213	SIGNATURE OF INVENTOR 214	SIGNATURE OF INVENTOR 215
DATE	DATE	DATE

216	FULL NAME OF INVENTOR	FAMILY NAME Drmanac	FIRST GIVEN NAME Snezana	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Palo Alto	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 850 East Greenwich Place	CITY Palo Alto	STATE & ZIP CODE/COUNTRY California 94303
217	FULL NAME OF INVENTOR	FAMILY NAME Labat	FIRST GIVEN NAME Ivan	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1735 Steiner Street	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94115
218	FULL NAME OF INVENTOR	FAMILY NAME Leshkowitz	FIRST GIVEN NAME Dena	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 678 Durshire Way	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California, 94087
	FULL NAME OF INVENTOR	FAMILY NAME Kita	FIRST GIVEN NAME David	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Foster City	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 899 Bounty Drive, #204	CITY Foster City	STATE & ZIP CODE/COUNTRY California 94404
219	FULL NAME OF INVENTOR	FAMILY NAME Garcia	FIRST GIVEN NAME Veronica	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP ES
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 396 Ano Nuevo, #412	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
221	FULL NAME OF INVENTOR	FAMILY NAME Jones	FIRST GIVEN NAME Lee	SECOND GIVEN NAME William
	RESIDENCE & CITIZENSHIP	CITY San Jose	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 396 Ano Nuevo, #412	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
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SIGNATURE OF INVENTOR 216		SIGNATURE OF INVENTOR 217		SIGNATURE OF INVENTOR 218
DATE		DATE		DATE
SIGNATURE OF INVENTOR 219		SIGNATURE OF INVENTOR 220		SIGNATURE OF INVENTOR 221
DATE		DATE		DATE

222	FULL NAME OF INVENTOR	FAMILY NAME Stache-Crain	FIRST GIVEN NAME Birgit	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP DE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 345 South Mary Avenue	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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SIGNATURE OF INVENTOR 222		SIGNATURE OF INVENTOR		SIGNATURE OF INVENTOR
DATE		DATE		DATE
SIGNATURE OF INVENTOR		SIGNATURE OF INVENTOR		SIGNATURE OF INVENTOR
DATE		DATE		DATE

M:\FORMS\COMDEC.WP 5/96

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Novel Human Genes and Gene Expression Products II

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U.S.A.	60/105,877	October 27, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,666	April 3, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT/US99/01619	January 28, 1999		XX	

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. *(List name and registration number)*

Karl Bozicevic, Reg. No. 28,807
 Bret E. Field, Reg. No. 37,620
 Dianna L. DeVore, Reg. No. 42,484
 Carol L. Francis, Reg. No. 36,513
 Pamela J. Sherwood, Reg. No. 36,677
 Renee A. Fitts, Reg. No. 35,136
 Paula A. Borden, Reg. No. 42,344

Robert P. Blackburn, Reg. No. 30,447
 Joseph H. Guth, Reg. No. 31,261
 Alisa A. Harbin, Reg. No. 33,895
 Charlene A. Launer, Reg. No. 33,035
 David P. Lentini, Reg. No. 33,944
 Kimberlin L. Morley, Reg. No. 35,391

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 Chiron Corporation
 4500 Horton Street
 Emeryville, California 94608-2916

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 Facsimile: (650) 327-3231

Direct Telephone Calls to:
(name and telephone number)

Name:
 Registration No.
 Telephone: (650) 327-3400

201	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		Williams	Lewis	T.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Tiburon	California	U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		3 Mirolfres	Tiburon	California 94920
202	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		Escobedo	Jaime	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Alamo	California	CL
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		1470 Lavorna Road	Alamo	California 94507
203	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
		Innis	Michael	A.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Moraga	California	U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
		315 Constance Place	Moraga	California 94556

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

204	FULL NAME OF INVENTOR	FAMILY NAME Garcia	FIRST GIVEN NAME Pablo	SECOND GIVEN NAME Dominguez
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP CL
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 882 Chenery Street	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94131
205	FULL NAME OF INVENTOR	FAMILY NAME Sudduth-Klinger	FIRST GIVEN NAME Julie	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Kensington	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 280 Lexington Road	CITY Kensington	STATE & ZIP CODE/COUNTRY California 94707
206	FULL NAME OF INVENTOR	FAMILY NAME Reinhard	FIRST GIVEN NAME Christoph	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Alameda	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP DE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1633 Clinton Avenue	CITY Alameda	STATE & ZIP CODE/COUNTRY California 94501
207	FULL NAME OF INVENTOR	FAMILY NAME Giese	FIRST GIVEN NAME Klaus	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Berlin DE	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP DE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Chausseetraub 92	CITY Berlin	STATE & ZIP CODE/COUNTRY Germany 10115
208	FULL NAME OF INVENTOR	FAMILY NAME Randazzo	FIRST GIVEN NAME Filippo	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 690 Chestnut Street, #403	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94133
209	FULL NAME OF INVENTOR	FAMILY NAME Kennedy	FIRST GIVEN NAME Giulia	SECOND GIVEN NAME C.
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 360 Castenada Avenue	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94116

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE
SIGNATURE OF INVENTOR 207	SIGNATURE OF INVENTOR 208	SIGNATURE OF INVENTOR 209
DATE	DATE	DATE

210	FULL NAME OF INVENTOR	FAMILY NAME Pot	FIRST GIVEN NAME David	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP CA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1565 5th Avenue, #102	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94112
211	FULL NAME OF INVENTOR	FAMILY NAME Kassam	FIRST GIVEN NAME Altaf	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Oakland	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2659 Harold Street	CITY Oakland	STATE & ZIP CODE/COUNTRY California 94602
212	FULL NAME OF INVENTOR	FAMILY NAME Lamson	FIRST GIVEN NAME George	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Moraga	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 232 Sandringham Drive	CITY Moraga	STATE & ZIP CODE/COUNTRY California 94556
213	FULL NAME OF INVENTOR	FAMILY NAME Drmanac	FIRST GIVEN NAME Radoje	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Palo Alto	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 850 East Greenwich Place	CITY Palo Alto	STATE & ZIP CODE/COUNTRY California 94303
214	FULL NAME OF INVENTOR	FAMILY NAME Crkvenjakov	FIRST GIVEN NAME Radomir	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 762 Haverhill Drive	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
215	FULL NAME OF INVENTOR	FAMILY NAME Dickson	FIRST GIVEN NAME Mark	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Hollister	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1411 Gabilan Drive, #B	CITY Hollister	STATE & ZIP CODE/COUNTRY California 95025

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 210	SIGNATURE OF INVENTOR 211	SIGNATURE OF INVENTOR 212
DATE	DATE	DATE
SIGNATURE OF INVENTOR 213	SIGNATURE OF INVENTOR 214	SIGNATURE OF INVENTOR 215
DATE	DATE	DATE

216	FULL NAME OF INVENTOR	FAMILY NAME Drmanac	FIRST GIVEN NAME Snezana	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Palo Alto	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 850 East Greenwich Place	CITY Palo Alto	STATE & ZIP CODE/COUNTRY California 94303
217	FULL NAME OF INVENTOR	FAMILY NAME Labat	FIRST GIVEN NAME Ivan	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1735 Steiner Street	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94115
218	FULL NAME OF INVENTOR	FAMILY NAME Leshkowitz	FIRST GIVEN NAME Dena	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 678 Durshire Way	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California, 94087
219	FULL NAME OF INVENTOR	FAMILY NAME Kita	FIRST GIVEN NAME David	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Foster City	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 899 Bounty Drive, #204.	CITY Foster City	STATE & ZIP CODE/COUNTRY California 94404
220	FULL NAME OF INVENTOR	FAMILY NAME Garcia	FIRST GIVEN NAME Veronica	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP ES
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 396 Ano Nuevo, #412	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
221	FULL NAME OF INVENTOR	FAMILY NAME Jones	FIRST GIVEN NAME Lee	SECOND GIVEN NAME William
	RESIDENCE & CITIZENSHIP	CITY San Jose	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 396 Ano Nuevo, #412	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 216	SIGNATURE OF INVENTOR 217	SIGNATURE OF INVENTOR 218
DATE	DATE	DATE
SIGNATURE OF INVENTOR 219	SIGNATURE OF INVENTOR 220	SIGNATURE OF INVENTOR 221
DATE	DATE	DATE

222	FULL NAME OF INVENTOR	FAMILY NAME Stache-Crain	FIRST GIVEN NAME Birgit	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP DE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 345 South Mary Avenue	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

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SIGNATURE OF INVENTOR 222	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE	DATE	DATE
SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE	DATE	DATE

\\FORMS\COMDEC.WP 5/96

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Novel Human Genes and Gene Expression Products II
the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as United States application

Serial No. 09/297,648

on May 4, 1999

and was amended

on _____ (if applicable).

☒ was filed as PCT international application

Number PCT/US99/01619

on January 28, 1999

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
U.S.A.	60/072,910	January 28, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/075,954	February 24, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,114	March 31, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,515	April 3, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/105,234	October 21, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/105,877	October 27, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
U.S.A.	60/080,666	April 3, 1998	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY'S DOCKET NUMBER 2300-1481CIP
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT/US99/01619	January 28, 1999		XX	

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Karl Bozicevic, Reg. No. 28,807
Bret E. Field, Reg. No. 37,620
Diana L. DeVore, Reg. No. 42,484

Carol L. Francis, Reg. No. 36,513
Pamela J. Sherwood, Reg. No. 36,677

Send Correspondence to:

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Facsimile: (650) 327-3231

Direct Telephone Calls to:

(name and telephone number)

Name:
Registration No.
Telephone: (650) 327-3400

201	FULL NAME OF INVENTOR	FAMILY NAME Williams	FIRST GIVEN NAME Lewis	SECOND GIVEN NAME T.
	RESIDENCE & CITIZENSHIP	CITY Tiburon	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 Miroflores	CITY Tiburon	STATE & ZIP CODE/COUNTRY California 94920
202	FULL NAME OF INVENTOR	FAMILY NAME Escobedo	FIRST GIVEN NAME Jaime	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Alamo	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP CL
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1470 Lavoma Road	CITY Alamo	STATE & ZIP CODE/COUNTRY California 94507
203	FULL NAME OF INVENTOR	FAMILY NAME Innis	FIRST GIVEN NAME Michael	SECOND GIVEN NAME A.
	RESIDENCE & CITIZENSHIP	CITY Moraga	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 315 Constance Place	CITY Moraga	STATE & ZIP CODE/COUNTRY California 94556

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

204	FULL NAME OF INVENTOR	FAMILY NAME Garcia	FIRST GIVEN NAME Pablo	SECOND GIVEN NAME Dominguez
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP CL
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 882 Chenery Street	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94131
205	FULL NAME OF INVENTOR	FAMILY NAME Sudduth-Klinger	FIRST GIVEN NAME Julie	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Kensington	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 280 Lexington Road	CITY Kensington	STATE & ZIP CODE/COUNTRY California 94707
206	FULL NAME OF INVENTOR	FAMILY NAME Reinhard	FIRST GIVEN NAME Christoph	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Alameda	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP DE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1633 Clinton Avenue	CITY Alameda	STATE & ZIP CODE/COUNTRY California 94501
207	FULL NAME OF INVENTOR	FAMILY NAME Giese	FIRST GIVEN NAME Klaus	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Berlin	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP DE
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Chausseetraub 92	CITY Berlin	STATE & ZIP CODE/COUNTRY Germany 10115
208	FULL NAME OF INVENTOR	FAMILY NAME Randazzo	FIRST GIVEN NAME Fillippo	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 690 Chestnut Street, #403	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94133
209	FULL NAME OF INVENTOR	FAMILY NAME Kennedy	FIRST GIVEN NAME Giulia	SECOND GIVEN NAME C.
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 360 Castenada Avenue	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94116
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SIGNATURE OF INVENTOR 204		SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206
DATE		DATE		DATE
SIGNATURE OF INVENTOR 207		SIGNATURE OF INVENTOR 208		SIGNATURE OF INVENTOR 209
DATE		DATE		DATE

210	FULL NAME OF INVENTOR	FAMILY NAME Pot	FIRST GIVEN NAME David	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP CA
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1565 5th Avenue, #102	CITY San Francisco	STATE & ZIP CODE/COUNTRY California 94112
211	FULL NAME OF INVENTOR	FAMILY NAME Kassam	FIRST GIVEN NAME Altaf	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Oakland	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2659 Harold Street	CITY Oakland	STATE & ZIP CODE/COUNTRY California 94602
212	FULL NAME OF INVENTOR	FAMILY NAME Lamson	FIRST GIVEN NAME George	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Moraga	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 232 Sandringham Drive	CITY Moraga	STATE & ZIP CODE/COUNTRY California 94556
213	FULL NAME OF INVENTOR	FAMILY NAME Drmanc	FIRST GIVEN NAME Radoje	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Palo Alto CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 850 East Greenwich Place	CITY Palo Alto	STATE & ZIP CODE/COUNTRY California 94303
214	FULL NAME OF INVENTOR	FAMILY NAME Crkvenjakov	FIRST GIVEN NAME Radomir	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Sunnyvale CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP YU
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 762 Haverhill Drive	CITY Sunnyvale	STATE & ZIP CODE/COUNTRY California 94086
215	FULL NAME OF INVENTOR	FAMILY NAME Dickson	FIRST GIVEN NAME Mark	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY Hollister CA	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP U.S.A.
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1411 Gabilan Drive, #B	CITY Hollister	STATE & ZIP CODE/COUNTRY California 95025
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.				
SIGNATURE OF INVENTOR 210		SIGNATURE OF INVENTOR 211		SIGNATURE OF INVENTOR 212
DATE		DATE		DATE
SIGNATURE OF INVENTOR 213		SIGNATURE OF INVENTOR 214		SIGNATURE OF INVENTOR 215
DATE		DATE		DATE

216	FULL NAME OF INVENTOR <u>16-00</u>	FAMILY NAME <u>Drmanac</u>	FIRST GIVEN NAME <u>Snezana</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Palo Alto CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>YU</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>850 East Greenwich Place</u>	CITY <u>Palo Alto</u>	STATE & ZIP CODE/COUNTRY <u>California 94303</u>
217	FULL NAME OF INVENTOR <u>17-00</u>	FAMILY NAME <u>Labat</u>	FIRST GIVEN NAME <u>Ivan</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>YU</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1735 Steiner Street</u>	CITY <u>San Francisco</u>	STATE & ZIP CODE/COUNTRY <u>California 94115</u>
218	FULL NAME OF INVENTOR <u>18-00</u>	FAMILY NAME <u>Leshkowitz</u>	FIRST GIVEN NAME <u>Dena</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Sunnyvale CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>678 Durshire Way</u>	CITY <u>Sunnyvale</u>	STATE & ZIP CODE/COUNTRY <u>California, 94087</u>
219	FULL NAME OF INVENTOR <u>19-00</u>	FAMILY NAME <u>Kita</u>	FIRST GIVEN NAME <u>David</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Foster City CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>899 Bounty Drive, #204</u>	CITY <u>Foster City</u>	STATE & ZIP CODE/COUNTRY <u>California 94404</u>
220	FULL NAME OF INVENTOR <u>20-00</u>	FAMILY NAME <u>Garcia</u>	FIRST GIVEN NAME <u>Veronica</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Sunnyvale CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>ES</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>396 Ano Nuevo, #412</u>	CITY <u>Sunnyvale</u>	STATE & ZIP CODE/COUNTRY <u>California 94086</u>
221	FULL NAME OF INVENTOR <u>21-00</u>	FAMILY NAME <u>Jones</u>	FIRST GIVEN NAME <u>Lee</u>	SECOND GIVEN NAME <u>William</u>
	RESIDENCE & CITIZENSHIP	CITY <u>San Jose CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>U.S.A.</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>396 Ano Nuevo, #412</u>	CITY <u>Sunnyvale</u>	STATE & ZIP CODE/COUNTRY <u>California 94086</u>

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SIGNATURE OF INVENTOR 216 <u>J. Drmanac</u>	SIGNATURE OF INVENTOR 217 <u>Ivan Labat</u>	SIGNATURE OF INVENTOR 218 <u>Dena Leshkowitz</u>
DATE <u>8/23/99</u>	DATE <u>08/23/99</u>	DATE <u>03/05/99</u>
SIGNATURE OF INVENTOR 219 <u>David Kita</u>	SIGNATURE OF INVENTOR 220 <u>Veronica Garcia</u>	SIGNATURE OF INVENTOR 221 <u>Lee Jones</u>
DATE <u>9/14/99</u>	DATE <u>08-31-99</u>	DATE <u>08-31-99</u>

222	FULL NAME OF INVENTOR <u>22-00</u>	FAMILY NAME <u>Stache-Crain</u>	FIRST GIVEN NAME <u>Birgit</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY <u>Sunnyvale CA</u>	STATE OR FOREIGN COUNTRY <u>California</u>	COUNTRY OF CITIZENSHIP <u>DE</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>345 South Mary Avenue</u>	CITY <u>Sunnyvale</u>	STATE & ZIP CODE/COUNTRY <u>California 94086</u>
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 222 <i>Birgit Stache-Crain</i>		SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE <u>8-23-99</u>		DATE	DATE
SIGNATURE OF INVENTOR		SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE		DATE	DATE

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